Medicare for people with permanent kidney failure

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Medicare for people with permanent kidney failure

Medicare health insurance is available to most people who have permanent kidney failure and need regular kidney dialysis treatments or a kidney transplant.

If you or someone in your family has permanent kidney failure, you should know about this important protection and how to apply for it.

If you have questions that aren't answered in this leaflet, you can obtain more information from any social security office.

Who is eligible?

Regardless of your age, if you need maintenance dialysis or transplant surgery because of permanent kidney failure, you are eligible for Medicare if:

- You have worked long enough to be insured under social security or the railroad retirement system, or
- You are already getting monthly social security or railroad retirement benefits, or
- You are the husband, wife, or dependent child of someone insured or getting benefits under social security or the railroad retirement system.

Only the family member who has permanent kidney failure is eligible for Medicare protection.

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How does a person apply for Medicare?

As soon as you know that you need maintenance dialysis treatments or kidney transplant surgery, you should apply for Medicare at any social security office. The people there will help you obtain any evidence you need. If you can't come to the office, a representative can visit you to take an application.

How much does Medicare cost?

Medicare has two parts—hospital insurance and medical insurance. If you are eligible, you don't pay a monthly premium for hospital insurance. There is a monthly premium for medical insurance. The basic premium rate is $8.20 a month through June 30, 1979. It will increase to $8.70 a month for the 12-month period beginning July 1, 1979. You don't have to take medical insurance if you don't want to, but many services for the treatment of permanent kidney failure are covered *only* under medical insurance.

Does Medicare cover only treatment for permanent kidney failure?

No. You have the same Medicare protection as people who qualify because they are 65 or older. So in addition to the care you need for permanent kidney failure, Medicare can help pay for many other hospital and medical services.

How does Medicare cover kidney transplant and maintenance dialysis services?

Medicare hospital insurance helps pay for kidney transplant surgery and related inpatient hospital services. Medicare medical insurance covers outpatient maintenance dialysis. Medical insurance also helps pay for doctors' services, including surgeons' services for transplant surgery; outpatient self-dialysis training; and home dialysis equipment, supplies and periodic support services.

A detailed explanation of Medicare coverage and payments is given in *Your Medicare Handbook* and its supplement, *Medicare coverage of kidney dialysis and kidney transplant services.* You can obtain copies at any social security office.

Where can maintenance dialysis and transplant surgery be obtained under Medicare?

To receive Medicare payments, medical facilities must be specifically approved to provide maintenance dialysis, self-dialysis training, or kidney transplant surgery, regardless of whether they participate in Medicare to provide other health care services covered by hospital insurance and medical insurance.

Approved facilities must meet special health, safety, professional, staffing, and minimum utilization standards that are directly related to dialysis and kidney transplant services. They also must meet Federal, State, and local requirements for medical facility planning. The medical facility can tell you whether it is approved by Medicare for payment of dialysis and transplant services. Or, your doctor may know.

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When does Medicare coverage begin?
If you are receiving maintenance dialysis treatments, your Medicare protection starts on the first day of the third month after the month that you start these treatments. For example, if you began receiving maintenance dialysis treatments in July, your Medicare coverage would begin on October 1st.

There are two ways Medicare coverage can begin earlier.

- Medicare coverage can begin in the *first* month of a course of dialysis, if you participate in a self-dialysis training program in a Medicare-approved facility prior to the third month after the course of dialysis begins, *and* you are expected to complete the training and self-dialyze thereafter.
- Medicare coverage can begin the month you are admitted to an approved hospital for a kidney transplant or procedures preliminary to a transplant *if* the transplant takes place in that month or within the 2 following months.

When does Medicare coverage end?
When you have Medicare because of permanent kidney failure, coverage ends 12 months after the month you no longer require maintenance dialysis treatments or 36 months following a kidney transplant. But if the transplant fails during or after that 36-month period so that you again need maintenance dialysis or another transplant, Medicare coverage will continue or be reinstated immediately without any new waiting period.

Your Medicare medical insurance coverage, however, can stop before that for failure to pay premiums or if you decide to cancel this part of your Medicare protection.

Are there other sources that help pay for treatment of kidney failure?

Yes. If you have health care protection from another source—for example, from private health insurance, the Veterans Administration, the Indian Health Service, or a Federal employees' health plan—it may help pay for your treatment.

There are also agencies in most States that can help with some of the medical expenses Medicare does not cover. Some States have Kidney Commissions that help people who need assistance in meeting expenses of kidney dialysis and transplant services. And most States have a Medicaid program that helps pay medical expenses in cases of serious financial need.

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